MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
10/584332	12 MAY 2006
APPLICANT(S)	

CLAIMS

	AS FILED IND.	AS FILED DEP.	AFTER 1ST AMENDMENT IND.	AFTER 1ST AMENDMENT DEP.	AFTER 2ND AMENDMENT IND.	AFTER 2ND AMENDMENT DEP.			AS FILED IND.	AS FILED DEP.	AFTER 1ST AMENDMENT IND.	AFTER 1ST AMENDMENT DEP.	AFTER 2ND AMENDMENT IND.	AFTER 2ND AMENDMENT DEP.
1	1		1				51							
2		1		1			52							
3		2		1			53							
4		0		1			54							
5		0		1			55							
6		0		1			56							
7		0		1			57							
8	1		1				58							
9		1		1			59							
10		2		1			60							
11		0		1			61							
12		0		1			62							
13		0		1			63							
14		0		1			64							
15		0		1			65							
16		0		1			66							
17		0		1			67							
18		0		1			68							
19		0		1			69							
20		0		1			70							
21							71							
22							72							
23							73							
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40							90							
41							91							
42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
TOTAL IND.	2		2				TOTAL IND.							
TOTAL DEP.	20		18				TOTAL DEP.							
TOTAL CLAIMS	22		20				TOTAL CLAIMS							

PTO-1360 (REV. 11/84)